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Bib Data Sheet

CONFIRMATION NO. 7253

SERIAL NUMBER 10/829,282	FILING DATE 04/22/2004 RULE	CLASS 528	GROUP ART UNIT 1712	ATTORNEY DOCKET NO. 251240US0
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APPLICANTS

Eiichi Tabei, Annaka-shi, JAPAN;

Mitsuhiro Takarada, Takasaki-shi, JAPAN;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

JAPAN 2003-118670 04/23/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/28/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 0	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature Initials				

ADDRESS

22850
 OBLON, SPIVAK, MCCLELLAND, MAIER & NEUSTADT, P.C.
 1940 DUKE STREET
 ALEXANDRIA, VA
 22314

TITLE

Curable silicone resin composition

FILING FEE RECEIVED 970	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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